MANATEE TECHNICAL INSTITUTE
STUDENT RECORDS DEPARTMENT
5603 34th Street W
BRADENTON, FL 34210
941-751-7900 / EXT. 2096 or 2097 / FAX: 941-727-6491

MANATEE TECHNICAL INSTITUTE
School District of Manatee County

STUDENT RECORDS RELEASE AUTHORIZATION

____Transcript ____ Grades
____Verification Letter ____ Clock Hours Completed
____ Attendance ____ Other:_____
____Financial Aid/Student Accounts

This release is valid from the date signed to _____
(mm/dd/yy)

Records of (full name while in school)_____
First Middle Last Maiden

Date of Birth: _____ **Student ID Number:** _____ **Daytime Phone:** _____

Requested Information To:

Person: _____

Address: _____

This listed person is identified as:

_____ **Parent** _____ **Spouse** _____ **Other** _____

PLEASE READ CAREFULLY

I hereby grant **Manatee Technical Institute, their legal representatives and assigns, the right and permission to disclose the above noted information to the agency/individual listed above. I understand that this form authorizes Manatee Technical Institute to disclose personally identifiable information from my educational record to a third party and I release Manatee Technical Institute, its employees, officers and trustees, from any liability for acting in accordance herewith.**

Signature: _____ Date: _____

IDENTIFICATION PROVIDED: _____
(Official Picture ID, Driver License, State Issued photo I.D., or Passport)

WITNESS _____
(Witness must be a School District employee)

OR NOTARY:

COUNTY OF_____)

STATE OF)

The foregoing instrument was acknowledged before me this _____ day of _____, 200___, by _____. who is personally known to me OR has provided _____ as identification.
(SEAL)

Name: _____
NOTARY PUBLIC
STATE OF _____AT LARGE
Commission Expires: _____

Rights to and Access Procedures: Florida State Statute 1002.22 - Compliance with a written request to receive a Student's(s) Educational Record shall be done as quickly as administratively feasible/reasonable or within Thirty (30) Calendar days.

FOR OFFICE USE ONLY

Date Received: _____ Date Sent: _____ by: _____